State of Michigan Employee Benefits Summary & Enrollment Information

March 1, 2005



As a State of Michigan classified employee, you are entitled to a comprehensive benefits package, including health, dental, vision, life insurance, longterm disability, flexible spending accounts, and more!

> State of Michigan Department of Civil Service Employee Benefits Division



Important Notice:

This booklet is a summary of benefits provided to State of Michigan employees and is not an agreement between any employee and the State of Michigan. More complete details on benefits are found in the official documents, such as the Civil Service Rules and Regulations, collective bargaining agreements, departmental work rules, and contracts with various benefit providers. If this booklet and an official document differ, the official document governs.

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Welcome!

If you would like to participate in the State of Michigan's health, vision, dental, employee/dependent life, long-term disability (LTD) and flexible spending account benefits, you must enroll within 31 days of your hire date.

Coverage will be effective on the first day of the bi-weekly payroll period following EITHER your first day of employment OR the date when the enrollment process is completed, whichever is later.

If you elect not to enroll for benefits within the first 31 days of hire, your next opportunity will be during annual open enrollment, usually in the month of August.

Your Benefits Checklist

The checklist below will assist you with the benefit enrollment process.

- Review this booklet for basic information.
- Go to www.michigan.gov/mdcs to review benefit options.
 Click the "Employee Benefits" link from the left menu, then click the "New Employee" link.
- Determine which insurances you would like to enroll in.
- Enroll in your insurances. Contact the MI HR Service Center toll free at 1 (877) 766-6447. Hours are 7:00 a.m. to 6:00 p.m. Monday through Friday, except state holidays.
- Mail or fax dependent eligibility documentation to the MI HR Service Center, if applicable (see Pages 16-17).

Who can enroll?

You may choose to enroll your spouse and/or eligible dependents in your health, dental, vision, and life insurance plan at the time you enroll as a new employee, during any annual open enrollment period, or as the result of a life event. Any time a spouse or dependent is added to your insurance, you must submit dependent eligibility documentation (see Pages 16-17) within 31 days of the event. For more information, visit the Employee Benefits Division website at www.michigan.gov/mdcs. Click the "Employee Benefits" link from the left menu.

Dual Eligibility

If you and your spouse or dependent are currently working for the State of Michigan and are both covered by State Health Plans (retiree or active, including State-sponsored HMO options), you may:

- Maintain separate coverage through your individual plans, OR
- Enroll in one plan with one of you as a dependent.

If you choose to maintain separate coverage, your child or children can only be listed on one plan, not both. This applies even if you are divorced.

Insurance Cards

Identification cards will be issued directly from individual carriers, when applicable. Delta Dental does not issue ID cards.

Insurance Rates

You can view insurance rates on the Department of Civil Service website at www.michigan.gov/mdcs. Click the "Employee Benefits" link from the left menu, then click the "Insurance Rates" link.

Employees hired after January 1, 2000, who are working part-time (less than 40 hours per pay period) may be required to pay one-half of their health, dental, and vision insurance premiums, based on the employee's bargaining unit.

Life Event Changes

A marriage, birth, adoption, divorce, etc., can be entered either in your MI HR Self-Service account or by calling the MI HR Service Center for assistance. When children become ineligible, you should contact the MI HR Service Center to stop insurance coverage. Changes must be processed within 31 days of the life event and must be substantiated with appropriate documentation (see Pages 16-17).



Beneficiary Changes

Beneficiary designation for final compensation and life insurance can be completed on-line in your MI HR Self-Service account at www.michigan.gov/selfserv.

The Defined Benefit Retirement, Deferred Compensation Plan (CitiStreet) and Accidental Duty Death carriers require an original signature to add or change beneficiaries. These forms can be printed from your MI HR Self-Service account. The beneficiary forms for Defined Benefit Retirement or Deferred Compensation Plan should be sent to CitiStreet. The Accidental Duty Death form should be sent to your HR Office.

For more information about MI HR Self-Service, see Page 14.

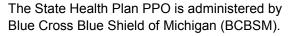


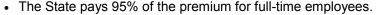
The following is a brief description of the various insurance benefits offered to State of Michigan employees. Complete details for each plan are available on the Department of Civil Service website at www.michigan.gov/mdcs. Click the "Employee Benefits" link from the left menu.

Health Care Options

You may elect one of the following health insurance plans:

☐ State Health Plan - Preferred Provider Organization (PPO)





- · This plan provides health benefits using providers and facilities that are "in-network," meaning the providers and facilities have agreed to accept a discounted fee from BCBSM in order to be "in-network."
- Network covers all 83 Michigan counties.
- There are deductible requirements.
- You must pay office and prescription drug co-pays.
- Mail order prescription medications are administered by Express Scripts.
- · Mental health and substance abuse treatment services are handled by Magellan Behavioral Health.

☐ Health Maintenance Organization (HMO) Plans

An HMO is a managed care plan that provides medical care through its network of physicians, pharmacies, contracted hospitals, and medical care suppliers in a particular service area.

 Full-time employees may have to contribute toward the HMO premium if the HMO charge exceeds 95% of the State Health Plan PPO rate

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There are no deductible requirements.



Health Maintenance Organization (HMO) Plans Continued...

- You must pay office and prescription drug co-pays.
- You can choose your own "primary care physician" who will provide direct care and make referrals from within the network.
- Your eligibility for enrollment is based on your zip code and bargaining unit.
- A zip code listing for each HMO can be viewed on the Department of Civil Service website at www.michigan.gov/ mdcs. Click the "Employee Benefits" link from the left menu, then click "New Employee", "Health", the "Health Care Options." The zip code listing link is located near the bottom of the page.

☐ Catastrophic Health Plan

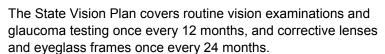
This is a hospitalization-only plan intended as an option for those employees who have coverage elsewhere. This plan does not cover prescription drug charges, office visit charges, medical equipment, psychiatric services, or other major medical services.

- The State will cover 100% of the premium cost for full-time employees and you will receive a \$50 cash payment bi-weekly for being enrolled in this plan.
- Benefits under this plan are payable only after you have covered those expenses equal to one month's basic salary (your deductible requirement).

Vision Care

The State offers one vision plan:

☐ State Vision Plan



- The State pays 100% of the premium for full-time employees.
- There is a co-payment for exams, lenses, and frames.



Dental Care Options

You may select one of the following plans:

☐ State Dental Plan

The State Dental Plan is administered by Delta Dental.

- The State will pay 95% of the premium for full-time employees.
- This plan covers preventative services (exams and cleanings) at 100% of the "usual, customary, and reasonable charge."
- X-rays, oral surgery, extractions, restoratives, periodontics, and endodontics are covered at 90%.
- Orthodontics are covered at 60% up to \$1,500.
- Sealants for children and prosthodontics (including repairs) are covered at 50%.

☐ Preventative Dental Plan

- The Preventative Dental Plan covers diagnostic exams, x-rays, and cleanings to the same extent as the State Dental Plan. No other services are covered.
- The State will pay 100% of the premium for full-time employees and you will receive a \$100 lump sum cash payment each year (pro-rated for mid-year enrollment).

This plan is intended as an option if you have dental coverage elsewhere.

☐ Dental Maintenance Organization (DMO) (Midwestern Dental Plans)

This is a managed care dental plan that provides all necessary dental care and services as Midwestern Dental Plans' dental care centers.

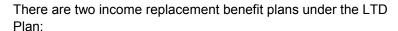
- The State will pay 100% of the premium for full-time employees.
- There are no member co-pays required for any covered dental care received at a dental center, except for an orthodontics copay for adults (age 19 and older).
- There are no benefit maximums.

Your postal code and bargaining unit will determine if you are eligible to enroll in the DMO.

☐ State Long-Term Disability (LTD) Plan

The State Long-Term Disability (LTD) Plan is designed to protect an employee's income during extended absences caused by nonwork related injuries or illness.

- The State will cover a portion of the total premium cost.
- Each enrolled employee will contribute a share of the remaining total premium cost based on his or her salary and accumulated sick leave.



Plan I pays a monthly benefit equal to 2/3 of your basic monthly salary until you are no longer totally disabled or for 24 months, whichever occurs first.

Plan II pays a monthly benefit equal to 2/3 of your basic monthly salary until you are no longer totally disabled or reach age 70, whichever occurs first.

Your eligibility for Plan I or Plan II is determined by your accumulated sick leave balance. You will be considered a Plan I employee when you have 183 or fewer hours of accumulated sick leave. You will be considered a Plan II employee when you have accumulated 184 hours or more of sick leave.

□ Long-Term Care

Long-Term Care provides coverage for expenses that are not usually covered by health or disability insurance. This coverage can help protect you and your family from the high costs associated with prolonged nursing home stays, extended home care services, and other forms of daily care. New employees are able to sign up within 90 days of their hire date without having to show evidence of good health. The State does not contribute towards the premium for this coverage. Premiums are fully paid by the employee.

Employee Life Insurance Options

You may select one of the following life insurance plans:

☐ State Life Insurance Plan (United of Omaha)

The State will cover 100% of the premium cost of the State Life Insurance Plan. This is the traditional group life insurance plan that pays your designated beneficiaries a non-taxable death benefit equal to two times your basic annual salary rounded up to the next \$1,000.



Reduced Benefit Life Insurance Plan (United of Omaha)

The Reduced Benefit Life Insurance Plan pays your designated beneficiaries a non-taxable death benefit equal to 100% of your basic annual salary or up to a maximum of \$50,000. You will receive a bi-weekly cash payment for selecting this reduced life insurance option.

□ Dependent Life Insurance Options

You have the option of enrolling your legal spouse and eligible children in one of the Dependent Life Insurance plans. These plans will cover your spouse and unmarried children between the ages of 14 days and 23 years. Unmarried dependent children between the ages of 19 and 23 do not have to have student eligibility to be enrolled in dependent life. The State does not contribute towards the premium for this coverage. Premiums are fully paid by the employee.



☐ Flexible Spending Accounts



You may choose to enroll in the Dependent Care and/or the Medical Care Spending Accounts.

Michigan's Flexible Spending Accounts let you pay for dependent care and out-of-pocket medical expenses with pre-tax dollars, making these expenses more affordable. The Flexible Spending Accounts are convenient and easy to use. With a little up-front planning, you can enjoy

significant tax savings while paying for a wide array of out-ofpocket medical and dependent care expenses.

☐ Defined Contribution Retirement Plan

If you were hired after March 31, 1997, you will be enrolled in the Defined Contribution Retirement Plan, also known as the 401(k) plan. The State will contribute an amount equal to 4% of your gross wages to your 401(k) for retirement. The State will also match up to 3% of your bi-weekly contributions. Contact CitiStreet

at (800) 748-6128 for more information about this 401(k) plan and to learn about investment options.

Other Benefit Programs

☐ Qualified Parking

Employees who park in non-state facilities may authorize bi-weekly payroll deduction on a pre-tax basis into a Qualified Parking Spending Account. From the account, employees can request reimbursement to cover their parking expenses.

☐ Accidental Death & Dismemberment

J.C. Walters is the administrator for this insurance. This is a Group Accidental Death & Dismemberment coverage offered through Mutual of Omaha Insurance Company and made available to State of Michigan employees. Premiums are fully paid by the employee.

COBRA (Consolidated Omnibus Budget Reconciliation Act)

Several different events may trigger the loss of insurance coverage for employees (e.g., separation, leave, layoff, reduction of hours), spouses (e.g., divorce, death of employee), or dependent children (e.g., marriage, turning 25, or 19 or older and not regularly attending school).

Under COBRA, if you, a spouse, or dependent should lose eligibility for state-sponsored group health, dental, or vision insurances, you may be eligible to continue these coverages for a period of time by paying the full premium directly to the Employee Benefits Division. This full premium will include the amount previously paid as the "Employee's Share" plus the "State's Share" and in some cases, an additional 2% service fee.

You may also be eligible to continue your life insurance coverage if you are on a leave of absence or layoff from State service.

HIPAA (Health Insurance Portability & Accountability Act)

The Employee Benefits Division of the Department of Civil Service currently administers the following self-insured group health plans for State employees and retirees on behalf of the State of Michigan:

- Flexible Spending Accounts Plan (FBMC)
- Preventative Dental Plan (Delta Dental)
- State Catastrophic Health Plan (BCBSM)
- State Dental Plan (Delta Dental)
- State Health Plan PPO (BCBSM or Aetna/Magellan/Express Scripts)
- State Vision Plan (BCBSM)

The Health Insurance Portability & Accountability Act (HIPAA) and related rules require group health plans to protect the privacy of health information. Your rights under HIPAA are outlined in the Privacy Notice available on the Department of Civil Service website at www.michigan.gov/mdcs. Click the "Employee Benefits" link from the left menu, then click the "HIPAA" link.

MI HR Self-Service

MI HR Self-Service is an on-line webbased tool designed to provide you with access to update and view your personnel information. As a new state employee, you will be provided access



to MI HR Self-Service. This on-line tool allows you to update your personal records such as address and home phone, emergency contacts, e-mail address, beneficiaries, direct deposits, and family status. During special enrollment periods, you can complete your Group Insurance Benefits Open Enrollment, Flexible Spending Account Open Enrollment, and/or make contributions during the State Employees Combined Contribution Campaign (SECC). You can also get updated information and forms for insurance coverage, tax withholding, leave balances, earning statements, and more.

New Employees

Your MI HR Self-Service account will be created one day after your HIRE transaction has been entered in the system. HRMN Central Security will create an account and mail two separate letters to your home address on record. The first letter notifies you that your MI HR Self-Service account has been created and provides you with your MI HR Self-Service username. The second letter includes a temporary PIN and instructions on how to set up your security profile on-line and activate your MI HR Self-Service account.

Once you have completed your security profile and submitted the information on-line, your new password will appear in a pop-up window for **93 seconds**. Your MI HR Self-Service account will be fully activated and accessible within 10 minutes after receipt of your new password.

If you have difficulty obtaining your first password or would like someone to walk you through the process, please contact the MI HR Service Center (see Page 15). Be sure to have your username and temporary PIN when you call.

MI HR Service Center

The MI HR Service Center has a staff of State of Michigan HR employees who are there to answer your benefit questions and assist you with benefits enrollment.

The MI HR Service Center is available from 7:00 a.m. to 6:00 p.m., Monday through Friday, except on state holidays.

Documentation must be mailed/faxed to the MI HR Service Center within 31 days from the date you enroll dependents in your insurances. A listing of acceptable documents can be found on pages 16 and 17 of this brochure.

MI HR Service Center

Toll Free: 1 (877) 766-6447

TDD: (517) 241-8046 Fax: (517) 241-5892

Mailing Address: P.O. Box 30002 Lansing, MI 48909

Hours of Operation: 7:00 a.m. to 6:00 p.m. Monday through Friday (except on state holidays)

Dependent Eligibility Documentation

Below is a listing of documents that can be used to prove dependent eligibility for insurance coverage. This documentation must be mailed/faxed to the MI HR Service Center within 31 days from the date you enroll dependents in your insurances.

Forms can be found on the Employee Benefits Division website at www.michigan.gov/mdcs. Click the "Employee Benefits" link from the left menu, then click the "Forms" link from the left menu.

Required Documentation for Children Ages Birth Until 19		
Specific Circumstance	Required Documentation	
Biological child	Copy of birth certificate	
Legally adopted or pending adoption	Copy of adoption papers or sworn statement with the date of placement.	
Employee has legal guardianship	Copy of guardianship papers	
Employee's minor child has a baby	Copy of birth certificate	
Employee has step-child	Most current divorce document of the employee's spouse, stamped by court to verify physical custody. Note: The first and last pages are required in addition to any language about insurance enrollment and custody.	

school.

Dependent Eligibility Documentation

Required Documentation for ages 19 Until 25

Specific Circumstance

Employee has dependent who is unmarried, dependent on the employee for at least 50% of his/her support, and is a student who regularly attends an accredited

Required Documentation

Completed Verification of Dependent Eligibility for State-Sponsored Insurance Plans (CS-1771) available on the Employee Benefits Division (EBD) website verifying the child qualifies, and school registration or other record (proving legal residency and school attendance).

In the case of children of divorced spouses or step-children, the child must be an unmarried student who regularly attends school and is dependent on the employee for at least 50% of his/her support.

Court document, e.g., divorce decree stamped by the court (proving legal requirement). The first and last pages of a divorce decree are required in addition to any language about insurance enrollment, and a completed Verification of Dependent Eligibility for State Sponsored Insurance Plans (CS-1771) available on the Employee Benefits Division (EBD) website verifying the child qualifies, and a copy of school registration or other record (proving legal residency and school attendance).

Required Documentation for Other Circumstances		
Specific Circumstance	Required Documentation	
Spouse	Copy of marriage certificate	
Removing ex-spouse, dependent/ step-children due to divorce	Copy of the divorce decree stamped by the court. The first and last pages are required in addition to any language about insurance enrollment.	
Deleting dependent coverage due to death	Copy of death certificate	

Provider Contact Numbers

Detailed provider contact information for insurances mentioned in this brochure are also available in your MI HR Information account at www.michigan.gov/selfserv.

<u>Provider</u>	<u>Telephone</u>
Blue Cross Blue Shield of Michigan	(800) 843-4876
Magellan Behavioral of Michigan	(866) 503-3158
Express Scripts, Inc.	(800) 505-2324
Blue Care Network	(800) 662-6667
Care Choices Health Plan	(800) 852-9780
Grand Valley Health Plan	(616) 949-2410
Health Alliance Plan	(800) 422-4641
Health Plus of Michigan (Saginaw)	(800) 942-8816
Health Plus of Michigan (Flint)	(800) 332-9161
M-Care	(800) 658-8878
Medicare	(800) MEDICARE
Physician's Health Plan (Lansing)	(800) 832-9186
Physician's Health Plan (Jackson)	(800) 394-7569
Priority Health Plan	(800) 446-5674
Total Health Care	(800) 826-2862
Long Term Care (MetLife)	(800) GETMET8
Long Term Disability (Broadspire Services)	(800) 652-0025
Flexible Spending (FBMC)	(800) 342-8017
Delta Dental Plan of Michigan	(800) 524-0150
Midwestern Dental Plans, Inc.	(800) 544-6374
Deferred Compensation & Defined Contribution Plans administered by CitiStreet	(800) 748-6128
Accidental Death & Dismemberment (J. C. Walters)	(517) 699-7790
Workers' Compensation (Citizen's Management, Inc.)	(800) 324-9901

State of Michigan	
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STATE OF MICHIGAN DEPARTMENT OF CIVIL SERVICE MI HR SERVICE CENTER

Mailing Address: P.O. Box 30002 Lansing, MI 48909

Toll Free: 877-766-MIHR (6447)

TDD: 517-241-8046 Fax: 517-241-5892

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Employee Benefits Division Website www.michigan.gov/mdcs

MI HR Self-Service & MI HR Information www.michigan.gov/selfserv

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